APPLICATION FOR TRANSPORT FACILITIES

- 01. This application should be forwarded at least three working days prior to the required date.
- 02. If the applicant is from an Academic Department, application should be forwarded with the recommendation of the Head of the Department. Others should submit their applications through the relevant Heads of Division/Unit.
- 03. Vehicle will be reserved for the purpose if the request is approved.
- 04. Please contact the relevant Subject Clerk handling transport on the day prior to the intended date of travel for confirmation of the availability of the vehicle.

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Details of the Request		
1. Name of the Applicant 2. Contact Number (Mobile 3. Designation 4. Dept. /Division 5. The vehicle is required (i)Date (From) (ii)Time (From) (iii)Pick up location 6. Nature of duty	e):	Extension:
	ion:	
7	o be visited	Purpose
I certify that I will use the Applicant's signature :	·	dicated above and not use for any other purpose. Date:
Comments of Head of Departr	ment or Division	(3) Decision
Request recommended/not recommended		Approved/Not Approved
Head of the Department/Division	1	Dean (Engineering / Archi. / IT / Business / FGS) Registrar / Librarian Deputy Vice-Chancellor Vice-Chancellor
Head of the Department/Division	1	Registrar / Librarian
Date:	PART (I rision / Relevant Departm	Registrar / Librarian Deputy Vice-Chancellor Vice-Chancellor Date:
Date: Transport Clerk of GA (S) Div	PART (I rision / Relevant Departm of a vehicle to be assigned f	Registrar / Librarian Deputy Vice-Chancellor Vice-Chancellor Date:
Date: Transport Clerk of GA (S) Div Please Report on the availability	PART (In the price of a vehicle to be assigned from the part of a vehicle to be assigned from the part of a vehicle to be assigned from the part of th	Registrar / Librarian Deputy Vice-Chancellor Vice-Chancellor Date: I) ent or this purpose. Department Lead of Department

Approved/Noted. Please inform position to applicant by returning copy of this document.